



Press Release

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NVHR: Administration's National HIV/AIDS Strategy Recognizes Need For Better Care Coordination for Individuals Co-Infected with Viral Hepatitis

Washington, DC—With millions of Americans living with HIV/AIDS, chronic viral hepatitis, or a combination of both, the **National Viral Hepatitis Roundtable (NVHR)** welcomes the Administration's recognition of the need for better care coordination and integration of services for these individuals and supports recommendations contained within the new National HIV/AIDS strategy released yesterday in Washington. As the Administration's interagency working group on viral hepatitis works to meet an October 1, 2010 deadline for its own action plan, NVHR is hopeful that we will see a similar national commitment from the Administration. An estimated 5.3 million Americans are infected with chronic viral hepatitis, which is 4 times the estimated HIV/AIDS population. Chronic viral hepatitis is a leading cause of death in HIV patients in America.

"NVHR welcomes the Administration's recognition of the need for better care coordination for individuals afflicted with HIV/AIDS," said **Ms. Lorren Sandt, NVHR Chair and Executive Director of Caring Ambassadors Program, based in Portland, OR.** "With approximately 30 percent of all individuals living with HIV/AIDS co-infected with hepatitis C and 10 percent co-infected with hepatitis B, an integrated, comprehensive strategy is critical if we are going to win the war against these insidious diseases. The outdated 'silo' approach undermines quality and leads to higher costs throughout the system."

The Administration's national HIV/AIDS strategy provides a model for how to galvanize the entire public health infrastructure into action. With policymakers, clinicians, and others stakeholders seeking to transform our system into one based on preventive care, early intervention to screen, detect, and treat viral hepatitis is essential. With most Americans unaware they are infected, chronic viral hepatitis progresses far too often to liver cancer, cirrhosis, or liver failure. Delayed screening and treatment leads to billions of dollars in avoidable health care costs. Milliman estimates that public and private payers' cost of treating chronic viral hepatitis C alone will more than triple by 2024 to \$85 billion unless Washington acts. While proposed legislation would help address this crisis, NVHR believes more needs to be done.

"Just like yesterday's HIV/AIDS announcement, the viral hepatitis plague demands leadership from the highest levels of the federal government," added Ms. Sandt. "Otherwise, millions of Americans will be at risk of developing life-threatening complications."

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NVHR is a coalition of more than 150 public, private, and voluntary organizations dedicated to reducing the incidence of infection, morbidity, and mortality from chronic viral hepatitis that afflicts more than 5 million Americans. www.nvhr.org